

STATE: MINNESOTA  
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6. Medical care or any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.

See items 6.a. through 6.d.

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6.a. Podiatrists' services.

Podiatrists are paid using the same methodology as item  
5.a., Physicians' services. ~~Effective July 1, 1993, item 5~~  
~~becomes items 5.a.~~

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6.b. Optometrists' services.

Optometrists are paid using the same methodology as item  
5.a., Physicians' services. ~~Effective July 1, 1993, item 5~~  
~~becomes item 5.a.~~

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6.c. Chiropractors' services.

Chiropractors are paid using the same methodology as item  
5.a., Physicians' services. ~~Effective July 1, 1993, item 5~~  
~~becomes item 5.a.~~

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6.d. Other practitioners' services.

A. **Mental health services performed by a doctoral prepared mental health professional** are paid the lower of:

- (1) submitted charge; or
- (2) (a) 75% of the 50th percentile of the charges submitted by all providers of the service (except for services provided by home health agencies, home and community-based waiver services providers, IEP providers and providers whose payment rate is based on a percentage of the physicians' payment rate) in the calendar year specified in legislation governing maximum payment rates; or
- (b) State agency established rate, except that psychotherapy services are paid using the same methodology as item 5.a., Physicians' services.

Effective January 1, 2000, the rate is increased by three percent.

**Mental health services performed by a master's prepared mental health professional** are paid the lower of:

- (1) submitted charge; or
- (2) 80% of the reference file allowable established above for doctoral prepared mental health professionals.

**Mental health services performed by a master's prepared mental health professional in a community mental health center** are paid the lower of:

- (1) submitted charge; or
- (2) 100% of the reference file allowable established above for doctoral prepared mental health professionals.

**Mental health services provided by a mental health practitioner who is supervised by an enrolled provider** are paid to the supervising enrolled provider at the lower of:

- (1) submitted charge; or
- (2) 50% of the reference file allowable established above for mental health professionals.

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6.d. Other practitioners' services. (continued)

A. Day treatment services for mental illness are paid the lower of:

- (1) submitted charge; or
- (2) ~~\$19.51~~ \$20.09 per hour.

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6.d. Other practitioners' services. (continued)

B. **Public health nursing services** are paid the lower of:

- 1) submitted charge; or
- 2) State agency established rates based on comparable rates for services provided by a nurse practitioner in an office setting, or by a home health nurse in a home setting or by a nurse providing perinatal high risk services under item 20, Extended services to pregnant women.

Public health nurses who administer pediatric vaccines in item 2.a., Outpatient hospital services, available through the Minnesota Vaccines for Children Program pursuant to §1928 of the Act, are paid using the same methodology in item 2.a. for these vaccines.

Effective July 1, 1996 ~~1999~~, the rates for these ~~two~~ three personal care services ~~codes~~ are as follows:

<del>X5675</del> Initial Public Health Nursing Assessment Visit for Personal Care Services ( <i>in-person</i> )	<del>\$204.36</del> \$218.92/visit
<del>X5693</del> Public Health Nursing Reassessment Visit for Personal Care Services ( <i>in-person</i> )	<del>\$102.18</del> \$218.92/visit
Public Health Nursing Service Update	\$ 109.46/update

Effective July 1, 2000, the above rates for public health nurse review of need for personal care services is increased by three percent.

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6.d. Other practitioners' services (continued)

C. **Ambulatory surgical centers:**

Payment for facility services or facility component is the lower of:

- (1) submitted charge; or
- (2) (a) Medicare grouper rates; or
  - (b) if there is not a Medicare grouper rate, payment is at 105.6% of the 1990 average submitted charge; or
  - (c) if there is not a Medicare grouper rate and there is not a 105.6% of the 1990 average submitted charge, payment is at the State agency established rate, which is derived by backing down the submitted charge to 1990 (by using the CPI) and increasing this amount by 5.6%.



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6.d. Other practitioners' services. (continued)

D. **Administration of anesthesia by certified registered nurse anesthetists (CRNAs)** provided in an outpatient setting are paid the lower of:

- (1) submitted charge; or
- (2) (a) ~~+\$16.10 the Medicare CRNA conversion factor per 15 minute base unit value~~ ~~plus~~ ~~+\$1.07 + 1/15 of the Medicare CRNA conversion factor per one minute time unit~~, if the services are not provided under the medical direction of an anesthesiologist; or
- (b) (\$10.72 per 15 minute base unit value) plus (\$.71 per one minute time unit) if the services are provided under the medical direction of an anesthesiologist.

Hospitals continue to be paid for hospital employed CRNA services as part of the prospective payment system specified for inpatient hospital services in Attachment 4.19-A, unless CRNA services were not in the hospital's base rate, and if CRNA services are not part of the hospitals' base rate, they are paid as specified in items (1) and (2), above. Hospitals continue to be paid for hospital employed CRNA services through the payment system for outpatient hospital services specified in item 2.a. of this Attachment.

Certified registered nurse anesthetist services that are not administration of anesthesia are paid as specified in item 5.a., Physicians' services.

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6.d. Other practitioners' services. (continued)

E. **Nurse practitioner services** (independently enrolled) are paid the lower of:

- 1) submitted charge; or
- 2) 90% of the rate established for a physician providing the same procedure.

**Nurse practitioner services** (non-independently enrolled) are paid the lower of:

- 1) submitted charge; or
- 2) 65% of the rate established for a physician providing the same procedure.

If the services are paid through the payment for inpatient services, the nurse practitioner cannot separately bill for payment.

Laboratory, radiology, immunization, injection and allergy services are paid using the same methodology set forth elsewhere in this Attachment. EPSDT invoices are paid using the same methodology as item 4.b., Early and periodic screening, diagnosis, and treatment services.

Nurse practitioners who administer pediatric vaccines in item 2.a., Outpatient hospital services, available through the Minnesota Vaccines for Children Program pursuant to §1928 of the Act, are paid using the same methodology in item 2.a. for these vaccines.